	c.	, ,			l bococos as b	J.S. Pate	-4 4 Tm	domad Office	· U.S. DEG	7/31/2006. OM	OUNCOCC
Undo	PATE	NT APPLICA	TION F Substitute	REC	offection of information unless it displays a vaid OMB control number. ECORD Application or Docket Number.						
CLAIMS AS FILED PART I (Column 1) (Column 2)							SMALL ENTITY		OR .	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED			FILED	NUMBER	R	ATE	FEE		RATE	FEE	
BASIC G7 CF	FEE R 1.16(a))					<u> </u>		<u></u>	OR		<u></u>
TOTA	L CLAIMS FR 1.16(c))	,	minus 20 ≈				==		OR	X \$=	
INDE	PENDENT CLAIMS FR 1.16(b))		minus 3 =		·	× \$_	=		OR	X \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ \$_	=_		OR	+ \$=			
* If the difference in column 1 is less than zero, enter "o" in column 2.							OTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											İ
0	Q 10 00 (Column 3)						SMALL ENTITY			OTHER SMALL	
8	70-795	(Column 1) CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		EXTE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	• AMENDMENT	Minus	" 21	=]	× s	=	,	OR	x \$ <u>50</u> =	5000
	(37 CFR 1.16(d)	· A	Minus	<u>~1</u>	=	× s			OR	x \$=	
ME	(37 CFR 1.16(b))				P 116(0)				OR	+5 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							TAL D'L FEE		OR	TOTAL ADD'L FEE	50.00
		(Column 1)		(Calumn 2)	(Column 3)			·	ד		
F		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total (37 CFR 1.16(c))	•	Minus	**	=	x :			OR	x \$=	
2	Independent (37 CFR 1.16(b))	•	Minus	***	=	x	<u> </u>		OR	x s=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))] [+,	\$ <u>=</u>	 	OR	+ \$=	<u> </u>
TINOT RECEIVED							TAL OD'L FEE	= -	OR	TOTAL ADO'L FEE	
Ì		(Column 1)		(Column 2)	(Column 3)	- (-			٦		1
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	Ξ .	<u> </u>	\$ <u>=</u>	 	OR	x \$=	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	_ <u>*</u>	\$ <u>=</u>		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						· \$=		OR	+ \$:	
						A	OTAL DO'L FEE	<u> </u>	OR	TOTAL ADD'L FEE	· L
- 1		column 1 is less th	on the eat	ovin column 2 N	write "0" in colum	ın 3.					

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.
 This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection the individual case. Any comments including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.